



**SAN DIEGO POLICE DEPARTMENT - PERMITS AND LICENSING**  
1400 'E' STREET, MS-735, SAN DIEGO, CA 92101  
(619) 531-2250



**CARD ROOM WORKER PERMIT APPLICATION**

San Diego Municipal Code, Section 33.0101(c), states you must have a valid police permit to engage in a business or occupation designated as police regulated. Applications must be submitted to the **Police Permits and Licensing Unit**. You are responsible for being familiar with and complying with the rules and regulations related to Card Rooms. Copies of the Card Room Ordinance and General Divisions for police regulated activities may be obtained from the City Clerk's office located at 202 C Street, 2<sup>nd</sup> Floor, Telephone # (619) 533-4000 or via the City's website: [www.sannet.gov](http://www.sannet.gov) **SDMC Chapter 3, Article 3, Division 39 and Divisions 1-5.**

**PLEASE PROVIDE ALL OF THE FOLLOWING WHEN APPLYING  
FOR THE ABOVE MENTIONED POLICE PERMIT,  
INCOMPLETE APPLICATION PACKETS WILL NOT BE ACCEPTED:**

- **APPLICATION** - Police Permit Application. Fill out the application completely. A thirty (30) day investigation period begins at the time the application is submitted. A criminal records check will be made on each applicant.
- **STATEMENT OF UNDERSTANDING** – Read, sign and date.
- **LIVE SCAN FINGERPRINTS** are required for all new applicants. Fill out the attached "Request for Live Scan Service" form and bring it with you to the Live Scan agency. (See attached list of locations.) **The completed "Request for Live Scan Service" form is valid for only thirty (30) from the date your fingerprints were taken. After thirty (30) days you will be required to re-do your Live Scan fingerprints.**
- **IDENTIFICATION** - A current U.S. government issued photo identification card (i.e. Driver's License or Military I.D.) is required. Passports are no longer accepted forms of identification for the SDPD Permits and Licensing Unit.
- **INVESTIGATION and REGULATORY FEES** – Cash and checks are accepted. Please make checks, money orders and cashier's checks payable to City Treasurer. **NO THIRD PARTY OR OUT OF STATE CHECKS WILL BE ACCEPTED.** The investigation fee covers the cost of investigating and processing the application and is non-refundable.

* Regulatory Permit fee	\$ 65.00
* Application fee	\$104.00
* Photo fee	<u>\$ 15.00</u>
* Total	<b>\$184.00</b>



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1400 'E' STREET, MS-735, SAN DIEGO, CA 92101  
Telephone No.: (619) 531-2250



**APPLICATION**

**TYPE OF PERMIT:** \_\_\_\_\_

☐ Owner      ☐ Employee      ☐ Partner      ☐ Corporate Officer      ☐ LLC

Date of Birth: \_\_\_\_\_ Driver's License/ID #: \_\_\_\_\_ State: \_\_\_\_\_

Applicant's Full Name: \_\_\_\_\_

Other Names Used: (Maiden, Alias, Etc.) \_\_\_\_\_ Last First Middle Stage Name: \_\_\_\_\_

Residence Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Res. Ph. ( ) \_\_\_\_\_ Bus. Ph. ( ) \_\_\_\_\_ Cell Ph. ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Internet Web Site Address/Auction Site User Name: \_\_\_\_\_

Soc. Sec. #: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Eyes: \_\_\_\_\_ Hair: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Race: \_\_\_\_\_ Sex: \_\_\_\_\_

**Business Where Applicant Expects to be Employed:**

Business Name: \_\_\_\_\_ D.B.A.: \_\_\_\_\_

Business Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

**1. List previous residence addresses for the last five (5) years:**

Complete Addresses last five years		Year Date From	Year Date To
1			
2			
3			
4			
5			

**FOR OFFICE USE ONLY**

App. Date: \_\_\_\_\_ Permit Number: \_\_\_\_\_ Received by: \_\_\_\_\_ ☐ Live Scan Rec: \_\_\_\_\_

Records Check: \_\_\_\_\_ ☐ RI01 ok or \_\_\_\_\_  
Initials/ID # \_\_\_\_\_

Approving PCCO: \_\_\_\_\_ Date: \_\_\_\_\_

2.. List previous occupations, places of employment and/or schooling for the last five (5) years.

1	PLACE OF EMPLOYMENT	OCCUPATION	
	ADDRESS & PHONE	DATE FROM	DATE TO
2	PLACE OF EMPLOYMENT	OCCUPATION	
	ADDRESS & PHONE	DATE FROM	DATE TO
3	PLACE OF EMPLOYMENT	OCCUPATION	
	ADDRESS & PHONE	DATE FROM	DATE TO
4	PLACE OF EMPLOYMENT	OCCUPATION	
	ADDRESS & PHONE	DATE FROM	DATE TO
5	PLACE OF EMPLOYMENT	OCCUPATION	
	ADDRESS & PHONE	DATE FROM	DATE TO

3. List similar permits or licenses issued by any agency or board, or any city, county, state or federal agency in the past five (5) years. **IF NONE, INITIAL HERE:** \_\_\_\_\_

	TYPE OF LICENSE	LICENSE NUMBER	DATES HELD	CITY AND STATE
1.				
2.				
3.				

4. Have you ever had any permit or license issued by any agency or board, or any city, county, state or federal agency suspended or revoked? Yes ( ) No ( )

If yes, please complete below:

	CITY/STATE	DATE OF SUSPENSION OR REVOCATION	REASON
1.			
2.			
3.			

5. List all criminal convictions, except traffic convictions. Include pleadings of guilty to a lesser charge in satisfaction of, or as a substitute for, an original charge, and pleadings of *nolo contendere*. Expunged convictions must be listed per California Penal Code section 1203.4(a).

**IF NONE, INITIAL HERE:** \_\_\_\_\_

	CHARGE	DATE CONVICTED	LOCATION OF COURT
1			
2			
3			
4			
5			
6			

**APPLICANTS:** The right of reasonable inspection shall be a condition for issuance of a police permit. If a permit is issued, representatives of the police department shall have access to the business premises during normal business hours, which may include entry into the non-public portion of the business.

It is the responsibility of the permit holder to renew the permit no later than ten (10) calendar days after the expiration date on the permit. Failure to renew on time will result in penalty fee of \$25.00 plus 10% of the regulatory fee. If a renewal is not completed with all fees and penalties paid within thirty (30) days after the permit expiration date, the permit expires and business operations, occupations, or activities allowed by the permit must cease. A permittee must then begin the application process as a new applicant (Section 33.0308 of the San Diego Municipal Code).

I declare under penalty of perjury that the statements made on this application, including accompanying documents, are true, complete and correct to the best of my knowledge and belief. I understand that any false statements or information are grounds for denial of this application or loss of licensure and that I may be subject to prosecution per section 11.0401(b) of the San Diego Municipal Code.

**I AM AWARE THAT THE INVESTIGATION FEE IS NON-REFUNDABLE. I AM AWARE THAT I AM RESPONSIBLE FOR BEING FAMILIAR WITH AND COMPLYING WITH THE RULES AND REGULATIONS RELATED TO THE POLICE REGULATED BUSINESS OR OCCUPATION FOR WHICH I AM APPLYING. I AM AWARE THAT THE GRANTING OF A POLICE PERMIT DOES NOT RELIEVE ME FROM OBTAINING PERMITS OR APPROVALS REQUIRED BY THE CITY OF SAN DIEGO OR STATE OR FEDERAL LAW. I AM AWARE THAT THE GRANTING OF A POLICE PERMIT DOES NOT RELIEVE ME FROM COMPLYING WITH ALL APPLICABLE LOCAL, STATE, AND FEDERAL LAWS, INCLUDING THOSE RELATED TO BUILDING, ZONING, AND FIRE, AND OTHER PUBLIC SAFETY REGULATIONS. I AM AWARE THAT THE GRANTING OF A POLICE PERMIT DOES NOT VEST ANY DEVELOPMENT RIGHTS IN THE PROPERTY OR BUSINESS.**

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE OF APPLICATION

**PLEASE BE ADVISED THE INFORMATION YOU PROVIDE ON YOUR APPLICATION MAY BE SUBJECT TO PUBLIC DISCLOSURE PER THE CALIFORNIA PUBLIC RECORDS ACT.**





San Diego Police Department - Permits and Licensing Unit  
1400 'E' Street, MS 735  
San Diego, CA 92101  
Telephone No.: (619) 531-2250



**CARD ROOM WORKER**  
**Statement Of Understanding**  
**Operating Requirements And Regulations**

1. Name of Business where you will be working: \_\_\_\_\_
2. Name of Person who hired you: \_\_\_\_\_

**PLEASE READ CAREFULLY:** Card rooms in the City of San Diego are governed and regulated by the State of California's Gaming Regulations, the California Penal Code, and by the San Diego Municipal Code, Sections 33.3901 through 33.3923. You are responsible for being familiar with and complying with the rules and regulations related to card rooms. Copies of the Card room Ordinance and General Divisions for police regulated activities may be obtained from the City Clerk's office located at 202 C Street, 2<sup>nd</sup> Floor, Telephone # (619) 533-4000 or via the City's website: SDMC Chapter 3, Article 3, Division 39 and Divisions 1-5.

Section 33.3911 provides:

It shall be unlawful to operate a card room in violation of any of the following regulations and rules:

- (b) All card games that are lawful in the State of California and approved by the Division of Gambling Control of the State Department of Justice shall be allowed to be played in any card room.
- (d) Not more than nine players shall be permitted at any one card table.
- (f) No minor shall be permitted at any card table, or participate in any game thereat.
- (g) All card rooms shall be closed at 2:00 a.m., and shall remain closed until 9:00 a.m. of every day.
- (h) All card rooms shall be open to police inspection during all hours of operation.

Section 33.3914 provides:

Each card table shall have assigned to it a person whose duty shall be to supervise the game and see to it that it is played strictly in accordance with the terms of this Division and with the provisions of the Penal Code of the State of California. It shall be unlawful for any permittee, manager, employee, or any other person employed by or having any financial interest in any establishment holding a license under the provisions of this Division, to be physically present at any time upon said premises without his or her identification card identifying him or her with the card room. Such identification card is to be prominently displayed on the outermost garment at approximately chest height, and such identification card shall, at all times, be readable, legible, and in good condition.

No employee shall be allowed to commence work or remain upon said licensed premises who does not possess an identification card as issued by the Chief of Police.

**I have read and understand the requirements listed above. If I have any questions regarding these requirements or about my employment in a card room, I understand that I may schedule an interview with a Police Code Compliance Officer.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

## Live Scan Fingerprint Information

### **Municipal Code §33.0304 - Applicant and Employees to Furnish Fingerprints and Photographs**

For the purpose of investigation and for regulation of the occupation or business during the time it is licensed, applicants, *responsible persons*, managers, or *employees* may be required to furnish their fingerprints and photographs. ***Fingerprints must be taken by a governmental agency.*** The *Chief of Police* shall forward the fingerprints to the Identification Division of the State of California, Department of Justice, or the Federal Bureau of Investigation, for identity confirmation and criminal histories.

**The following are acceptable US Governmental Agencies located in San Diego County:**

#### CHULA VISTA

Chula Vista Police Department  
315 Fourth Street  
Chula Vista, CA 92010  
(619) 409-5954  
M - F (8am-12pm) **Appointments Only**  
M - F (1pm-4pm) **Appointments Only**  
[www.chulavistapd.org](http://www.chulavistapd.org)

#### LA JOLLA

UCSD Police Department  
9500 Gilman Dr #0017  
La Jolla, CA 92093  
(858) 534-4361 **Appointments Only**  
M - F 9am-3pm

#### SAN DIEGO

San Diego City Schools Police Services/EOC Bldg  
4100 Normal St  
San Diego, CA 92103-2682  
(619) 725-7015 **Appointments**  
(619) 725-7014 (Information)  
T - F (8:30am-1pm) **Walk In**  
T - F (2pm-4pm) **Appointments Only**  
Not open to general public on Monday's  
Closed School Holidays

#### SAN DIEGO - LSID X54/ML1

San Diego Community College Police  
1536 Frazee Road, 1st Floor  
San Diego, CA 92108  
Contact: (619) 388-6416  
M-Th (7:30am-5pm) **Wlk**  
F (7:30am-12 noon) **Wlk**  
E-mail address: [dpicou@sdcc.edu](mailto:dpicou@sdcc.edu)

#### ESCONDIDO

Escondido Police Department  
700 W Grand Ave  
Escondido, CA 92025  
Contact: (760) 839-4431  
M - F (9:00am-3:30pm) **Appointments Only**

#### LA MESA

La Mesa Police Department (Storefront)  
6119 Lake Murray Blvd  
La Mesa, CA 91942  
(619) 667-1342  
M, T, W (10am-4pm) **Appointments/Walk In**  
Th, F (9am-3pm) **Appointments/Walk In**

#### SAN DIEGO

San Diego State University  
5500 Campanile Dr  
SSE-1410  
San Diego, CA 92182  
(619) 594-3193  
M - F (8am-4pm) **Appointments Only**

**REQUEST FOR LIVE SCAN SERVICE**

BCII 8016 (3/07)

**Applicant Submission**ORI: CA 0371100

Code assigned by DOJ

Type of Application: Permits and Licensing

Job Title or Type of License, Certification or Permit: \_\_\_\_\_

Agency Address Set Contributing Agency:

San Diego Police Department

Agency authorized to receive criminal history information

08228

Mail Code (five-digit code assigned by DOJ)

P.O. Box 121431 - MS 735

Street No. Street or PO Box

Contact Name (Mandatory for all school submissions)

San DiegoCA92112-1431( 619- ) 531-2250

City

State

Zip Code

Contact Telephone No.

Name of Applicant:

(Please print)

Last

First

MI

Alias:

Last

First

Driver's License No: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Sex: ☐ Male ☐ FemaleMisc. No. BIL - Applicant to pay

Agency Billing Number

Height: \_\_\_\_\_

Weight: \_\_\_\_\_

Misc. Number: \_\_\_\_\_

Home Address: \_\_\_\_\_

Eye Color: \_\_\_\_\_

Hair Color: \_\_\_\_\_

Street No.

Street or PO Box

Place of Birth: \_\_\_\_\_

City, State and Zip Code

Social Security Number: \_\_\_\_\_

Your Number: \_\_\_\_\_

OCA No. (Agency Identifying No.)

Level of Service: ☒ DOJIf resubmission, list Original ATI  
Number: \_\_\_\_\_

Employer: (Additional response for agencies specified by statute)

**Not Applicable**

Employer Name \_\_\_\_\_

Street No.

Street or PO Box

Mail Code (five digit code assigned by DOJ)

City

State

Zip Code

( )

Agency Telephone No. (optional)

Live Scan Transaction Completed By: \_\_\_\_\_

Name of Operator

Date

Transmitting Agency

ATI No.

Amount Collected/Billed

ORIGINAL – Live Scan Operator; SECOND COPY – Applicant; THIRD COPY (if needed) – Requesting Agency